

## **Supplemental Application Data Sheet**

### **Application Information**

Application number::	10/690,704
Filing Date::	10/23/03
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHOD AND APPARATUS FOR DEPOSITING MATERIAL
Attorney Docket Number::	027462-000210US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	15
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Stephen  
Middle Name:: R.  
Family Name:: Forrest  
Name Suffix::  
City of Residence:: Ann Arbor  
State or Province of Residence:: MI  
Country of Residence:: US  
Street of Mailing Address:: ~~336 Rock Creek Court~~ 450 Church Street  
City of Mailing Address:: Ann Arbor  
State or Province of mailing address:: MI  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: ~~48104~~ 48109

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Max  
Middle Name::  
Family Name:: Shtein  
Name Suffix::  
City of Residence:: Ann Arbor  
State or Province of Residence:: MI  
Country of Residence:: US  
Street of Mailing Address:: ~~2732 Lowell Rd~~ 2300 Hayward St  
City of Mailing Address:: Ann Arbor  
State or Province of mailing address:: MI

Country of mailing address:: US  
Postal or Zip Code of mailing address:: ~~48103~~ 48109

**Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information**

Representative Customer Number:: 20350

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name:: The Trustees of Princeton University  
Street of mailing address:: Office of Technology and Trademark Licensing,  
4th Floor, New South Building  
City of mailing address:: Princeton  
State or Province of mailing address:: NJ  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 08544-0036

Submitted by:

Signature                     /ASKamlay/                     Date           April 20, 2010            
Printed Name                     Aaron Kamlay                     Registration Number                     58,813